Medicare Payment Problems Hurting Texas Patients

Medicare payment checks to physicians are flowing again – but they’re 21.3 percent smaller than they were this time last week as Medicare officials could no longer wait for Congress to figure out how to apply the latest Band-Aid. A TMA flash survey that accompanied the news reports of the latest Medicare Meltdown finds that Texas physicians will take or are considering some very drastic action in response. The chart below shows the preliminary responses to the questions, “Regardless of the outcome of the current Medicare payment cut, the ongoing cash flow problems and constant uncertainty over Medicare payments has led my practice to take, or consider, the following steps:”

- Reduce my total Medicare caseload. 252 68%
- Refuse all new Medicare patients. 210 57%
- Lay off staff. 197 53%
- Refer Medicare patients to the emergency room 120 33%
- Drop out of Medicare altogether. 117 32%
- Stop seeing existing Medicare patients. 91 25%
- It doesn’t matter, I don’t take Medicare anyway. 2 1%

The U.S. Senate on Friday (6/18/10) approved a deal stopping the cuts and raising fees 2.2 percent until Nov. 30. But the House of Representatives had already gone home for the weekend and was not scheduled to resume voting until Tues., (6/22/10). That led the Centers for Medicare & Medicaid Services, which had held Medicare payments since the first of the month, to direct Medicare contractors to begin processing claims dated June 1 and later under the new rates on a first-in, first-out basis. “Washington obviously doesn’t realize the damage they’re doing to our practices and our patients,” said TMA President Sue Bailey, MD.

Source: TMA EVPGram, June 21, 2010

Sign the Medicare Petition and share it!

Fifty state medical societies and more than 30 national and state specialty societies have joined Texas Medical Association’s (TMA’s) campaign to sign the Medicare Meltdown Petition. The petition urges Congress to permanently fix the Medicare physician payment system with a system that automatically keeps up with the cost of running a practice. Have you signed the petition yet? Have you asked your friends, family, and neighbors to sign it? If not, please do so today! Rarely has there been an issue as important to medicine as the impending Medicare crisis.

You must act now and sign the petition. You must let the members of Congress know that you and your patients are watching their every action and care deeply about this issue. Congress keeps telling us that physicians don’t care because they never hear from them. Let’s prove to Congress that “PHYSICIANS AND PATIENTS DO CARE.”

After you sign the petition, ask your friends, family and neighbors to sign it until you get 10 signatures or more. We must get one million signatures. It’s imperative to your profession! At www.nuecesmedsociety.org, there is a patient flyer available to give to your patients, as well as the online petition.

If you think this doesn’t affect you, think again. Insurance rates are based on Medicare. If Medicare physician payments are not fixed, many physicians will be making tough decisions on whether to continue to take Medicare patients, limit their Medicare patients or leave the practice of medicine – making patient access to care very difficult.

Call Pam Udall at TMA at 800-880-1300, ext. 1382, for hard copies of the petition, or download the petition and flyers for your office at www.nuecesmedsociety.org, under Medicare Meltdown.

Note: Due to HIPAA regulations, we recommend that you not collect signatures directly from your patients or use patient lists to disseminate this information without first having a HIPAA-compliant patient authorization to do so. However, you can post the flyer in your reception area with directions on where to sign the petition.

Source: TMA Action, June 1, 2010
Webinars for ethics CME

Texas Medical Association and Texas Medical Liability Trust have teamed up again to offer six webinars for physicians in all specialties who are interested in medical-legal compliance and practical ways to reduce the potential for professional liability. These one-hour courses are a quick, no-hassle way to learn about top areas of risk and receive CME without ever having to leave the office. Register for at least three programs and receive a TMLT discount or register for all six and receive two discounts!

This year’s webinar series will run from June 29 to Nov. 16 and will include discussions on:

- **June 29:** Avoiding RAC Audits – Employ documentation and coding audit tools to avoid RAC audits
- **July 27:** HIPAA/HITECH – Prepare and implement policies to comply with new HIPAA/HITECH regulations
- **Aug. 24:** Patient Satisfaction – Develop strategies to engage patients for better compliance and lower risk exposure
- **Sept. 28:** Health Care Disparities – Discuss drivers of health care disparities and identify solutions
- **Oct. 26:** Electronic Communications – Identify legal and ethical responsibility when communicating electronically with patients
- **Nov. 16:** Employed Physicians – Outline the pros and pros of independent practice vs. employment

Webinars are on Tuesdays from noon to 1 p.m. and will include an interactive Q&A, handouts, and tools. Participants may register for one program or take advantage of multi-program discount by signing up for the entire series.


Source: TMA

TMA online and home study CME

Earn CME at your convenience by taking one of Texas Medical Association's online or home study courses. Below is a sample of the courses offered:

**Online**

- **Coping with Stress in the Practice of Medicine** – *This course provides 2 AMA PRA Category 1 Credits™, 2 hours ethics and/or professional responsibility.*
- **How to Create Balance in Your Life** – This course provides 1 AMA PRA Category 1 Credit™, 1 hour ethics and/or professional responsibility. It expires July 31, 2010.
- **Electronic Medical Record: The Link to a Better Future** – This course provides 3 AMA PRA Category 1 Credits™, 3-percent reduction on TMLT professional liability premiums (not to exceed $1,000); 3 hours ethics and/or professional responsibility.

**Home Studies**

- **Medical Records** – This publication provides 4.0 AMA PRA Category 1 Credits™. TMA has designated this course for 1 hour ethics and/or professional responsibility education. TMLT insured may earn a 3-percent risk management discount upon completion of this home study, with a maximum discount of $1,000 per program. It expires on Aug. 15, 2010.
- **Switch: How to Change Things When Change Is Hard** – This publication provides 4.5 AMA PRA Category 1 Credits™. TMA has designated this course for 2 hours ethics and/or professional responsibility education. TMLT insured may earn a 3-percent risk management discount upon completion of this home study, with a maximum discount of $1000 per program.

For more information about these and other CME courses, go to the TMA Web site at [www.texmed.org](http://www.texmed.org) and click on CME in the left margin.

TRENDS Positive physician ratings on Web sites

The *Los Angeles Times* (5/18, Roan) “Booster Shots” blog reported that, according to a study appearing in the Journal of General Internal Medicine, physician rating sites “haven’t caught on in any big way with consumers,” and “many of the reviews posted online are positive.” The study showed that “patients just don’t appear too interested in providing feedback on their doctors, the authors noted.” Data indicated that of “33 physician rating sites that contained 190 reviews for 81 doctors,” 88% “were positive, 6% negative and 6% neutral.”

Source: AMA Morning Rounds, May 19, 2010

Extra 2009-2010 Directories are now on sale for $10 each to NCMS members ($15 + $1.24 tax for non-members) To reserve your copies, call Valerie at 884-5442.
Red Flags Rule delayed

The Federal Trade Commission (FTC) has delayed until Dec. 31 enforcement of the Red Flags Rule that was scheduled to take affect June 1. Click www.texmed.org for more information.

AMA and others sue to stop “Red Flags Rule”

Physician groups from around the country filed suit in federal court to prevent the Federal Trade Commission (FTC) from extending identity theft regulations to physicians. Led by the American Medical Association (AMA), the complaint alleges that the FTC’s application of its “red flags rule” to physicians is “arbitrary, capricious and contrary to the law.” The rule says physicians who regularly bill their patients for services (including billing for copayments and coinsurance) are creditors and must develop and implement written identity theft prevention programs for their practices. The programs must identify and respond to patterns, practices, or specific activities – known as “red flags” – that could indicate identity theft. The Litigation Center of the AMA and state medical societies developed and approved the filing of this case. Texas Medical Association (TMA) is a founding member of the Litigation Center, and TMA General Counsel Rocky Wilcox is chair of the executive committee.

Source: TMA EVPGram, May 24, 2010

July Calendar*

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>Mon 7/5</td>
<td>Fourth of July Holiday Day</td>
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<tr>
<td></td>
<td>NCMS Office closed</td>
</tr>
<tr>
<td>Wed 7/14</td>
<td>Blue Cross/Blue Shield</td>
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<td></td>
<td>Mini-Conferences 8 am—5 pm</td>
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* No meetings in July, except Health Fair & PHR

TMA Health Reform School

The Texas Medical Association (TMA) has created three brochures for physicians on health system reform: Eight Things Physicians in Independent and Small Group Practices Need to Know About Health System Reform; Survive and Thrive in New Health Landscape – What the New Health Care Law Means for Physicians’ Medicare Fees; and TMA Analyzes Pros and Cons of Health System Reform.

These brochures are available to download from the Texas Medical Association Web site, www.texmed.org, under Health System Reform.

NCMS has joined DocBooks!

The must have “app” for every physician with an iPhone. DocBook is a directory app with NCMS member physicians, as well as local pharmacy data. Just visit www.docbookmd.com to register for DocBook. You will need your TMA ID number from your dues statement. You can call NCMS at 884-5442 if you need that number. Once you’ve registered, simply download the app from the iTunes store. Enjoy!

Looking for office space?

See NCMS office space at 1000 Morgan Ave. 986 sq. ft available For more information, contact Paulette Shaw at 884-5442.
United ends H1N1 special payments

UnitedHealthcare is ending emergency reimbursement measures it instituted in October because the Centers for Disease Control and Prevention (CDC) data show that H1N1 cases have steadily declined since last fall. United announced that after consulting with federal and state public health officials:

- Special contracts with mass vaccinators and retail pharmacies to administer the H1N1 vaccine to UnitedHealthcare members expired May 1.
- Special coverage of the administration of the H1N1 vaccine, including the removal of related deductibles, copays and coinsurance fees, ended May 31. For dates of service on or after June 1, United will process claims for the H1N1 vaccine and its administration in accordance with its members’ benefit plans.
- Special reimbursement rates for H1N1 vaccine administration ended May 31, 2010. H1N1 vaccination services rendered on or after June 1, 2010, will be reimbursed in accordance with contracted fee schedule rates.

Source: CDC

Office Administrators & Managers
Stay Up To Date
To receive NCMS Notes, send us your name, physician’s name, and your mailing address to s.davis@nuecesmedsociety.org.

ACLS Renewal & Provider Courses

The South Coastal Area Health Education Center (AHEC) will sponsor ACLS Provider/Renewal Courses on Friday and Saturday, July 16 & 17, 2010, from 8:00 a.m. to 4:00 p.m. The courses will be held at CHRISTUS Spohn Corpus Christi Memorial Hospital. Check-in begins at 7:30 a.m.

The Provider course is a full Friday and half day on Saturday; fees are $250.00 for physicians and dentists and $200.00 for residents. Registration fee covers the updated AHA / ACLS Provider Manual, study materials, continental breakfast and lunch. The South Coastal Area Health Education Center is accredited by TMA to sponsor CME for physicians and designates this activity as meeting the criteria for 16 credit hours in Category 1 of the PRA of the AMA.

The Renewal course is a full day on Saturday; fee is $175.00. Registration fee covers the updated AHA/ACLS Provider Manual, study materials, refreshments, continental breakfast and lunch. Attendees must present a current ACLS card at the door for verification upon check-in. The South Coastal Area Health Education Center is accredited by TMA to sponsor CME for physicians and designates this activity as meeting the criteria for 8 credit hours in Category 1 of the PRA of the AMA.

For information, contact Mary Moreno at 902-4467 or Email: m.moreno@christushealth.org.
TDI Wants Medical Reviewers

The Texas Department of Insurance (TDI) Division of Workers’ Compensation is looking for physicians to serve on its Medical Quality Review Panel. Members are paid $150 per hour for their services.

Qualifications and other information [PDF] about the review panel are on the TDI website. The deadline to apply is 3 pm on Aug. 6.

For more information, contact Sandi Morgan, TDI Purchasing and Contracting Department MC 108-1 B, at PO Box 149104, Austin, TX 78714. Inquiries must be made in writing.

Source: TMA Action, June 15, 2010
NCMS plans 45th annual Health Fair

The Nueces County Medical Society (NCMS) plans to stage the 45th annual Health Fair on Saturday, August 14th at the American Bank Center. Last year’s event attracted almost 5000 people who took advantage of the opportunity to receive free screenings and educational materials related to good health care. With your help, we hope to surpass that number this year.

Corpus Christi’s dubious distinction as the “Fattest City in the United States” makes it even more critical that we make an extra effort to reach out to all of Corpus Christi and lead others to eating healthy, exercising, and becoming educated about diabetes, and other health issues related to obesity. This large obese population jeopardizes our community’s long-term economic viability and forces businesses, insured residents, and taxpayers to pick up the tab for billions of dollars in Emergency Room visits.

The Health Fair provides an opportunity for the medical community to present healthy alternatives to a very unhealthy condition. There will be over 100 booths for the public to visit, including a Children’s Area, sponsored by Driscoll Children’s Health Plan, focusing on children’s wellness, such as nutrition, exercise, immunizations, and health insurance programs, such as Medicaid and CHIP. Student athletes can receive school athletic physicals, at no charge. The American Heart Association will be offering training in CPR for family and friends and Coastal Bend Blood Center will be accepting blood donations. There will be a Breast Health information area that will have Mammogram screening assistance and an area with information for active older adults and seniors. The public will have the opportunity to receive a variety of screens and see demonstrations including:

- Adult Immunizations
- Blood Pressure Screening
- Breast Self Exam Demo
- Body Mass Index
- Children’s Dental Screening
- Cholesterol Screening
- Diabetic Retina Screening
- Diabetic Shoe Sizing
- Foot Screening
- Glucose Tests
- Hearing Screening
- HIV Testing
- Iron Counts
- Lap Bands
- Macular Degeneration Screening
- Pulse Oximetry
- Sleep Evaluations
- Spirometry
- Vision Screening
- Weigh-ins

KIII-TV will again be our major media sponsor, providing coverage and entertainment throughout the day, as well as, promotions of the event during the month of July. Sponsors will be listed on the KIII-TV commercials, the program distributed at the Health Fair, and in Coastal Bend Medicine magazine following the event. A live ‘Ask the Doctor’ booth will be available for attendees, and we still need volunteers to man this area.

If you haven’t signed up to be a sponsor for this outstanding public service event, please consider doing so by choosing one of the four levels of sponsorship available:

- Bronze sponsorship begins at the $250 donation level,
- Silver begins at $500
- Gold begins at $1,000 and
- Platinum begins at $2,000 and above

Information on what each level of sponsorship entails can be viewed on the NCMS web site at www.nuecesmedsociety.org. To be included in the advertisements and Health Fair program, we will need a copy of your logo and written confirmation of your donation to the Nueces County Medical Society by July 6, 2010. Don’t miss out on this opportunity to make a difference in our community! We need your support and participation.

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Health Fair Sponsors as of 6/23

**Platinum**
- CSHCC Memorial Trauma Services
- KIII-TV
- Sunnybrook Health Care Center

**Gold**
- Wayne Fagan, MD
- South Texas Brain & Spine Center
- Texas Medical Association
- The Children’s Clinic
- TMLT

**Silver**
- American Bank
- CHRISTUS Spohn Health System
- Padre Behavioral Hospital
- South Texas Retina
- Thomas-Spann Clinic, PA
- TMA Insurance Trust

**Bronze**
- Clinical Pathology Laboratories
- Miguel A. Berastain, MD, PA
- Driscoll Children’s Hospital
- Eisen J. Espina, MD, PA
- Neonatology Consultants of Corpus Christi

Health Fair Exhibitors as of 6/23

- Advanced Research Associates
- American Cancer Society
- Antonio Andrade, MD – Avatar
- Bay Area Quick Care
- Better Business Bureau
- BetterLife Bariatrics
- Care Improvement Plus
- Casa of the Coastal Bend
- City of CC Parks/Rec Sr. Comm. Services
- City of Corpus Christi - Storm Water
- Coastal Bend Autism Advocacy, Inc.
- Coastal Bend Blood Center
- Coastal Imaging
- Corpus Christi Metro Ministries
- Evercare
- Family Counseling/Crime Victim Service
- Garden Estates
- Humana Marketpoint
- Legacy Home Health & Hospice
- Lighthouse Hospice
- New Sound Hearing Aid Center
- Nurses on Wheels Inc
- Padre Behavioral Hospital
- Physicians Health Choice
- Planned Parenthood/Male Central Clinic
- Radiology Associates
- Radiology and Imaging
- Regional Transit Authority
- South Padre Island Pediatric Center
- South Texas Brain & Spine Center
- South Texas Family Planning & Health Corp.
- South Texas Lighthouse for the Blind
- Thomas-Spann Clinic, P.A.
- Trisun Healthcare
- Uresti Senior Assistance
- Valley Aids Council
- Vein Centers of Texas
- Visiting Angels
Monitor Blue Cross Compliance

It’s too late to file a claim, but physicians still need to make sure Blue Cross and Blue Shield (BCBS) continues to honor the terms of its settlement of a 2003 federal class action lawsuit that claimed numerous BCBS plans were involved in a scheme to defraud doctors in violation of the federal Racketeer Influenced and Corrupt Organizations Act (RICO).

Even though it is not formally named in the notice of the settlement that physicians received in 2008, BCBS of Texas is part of the agreement.


BCBS agreed in the settlement that it:

- May not seek overpayment recovery beyond 18 month (six months for insured plans) unless fraud is implicated;
- Must use a clinically based definition of medical necessity;
- Must adhere to most CPT coding rules, including payment for evaluation and management codes appended with modifier 25 and payment for add-on codes;
- Must provide 90 days advance notice of material adverse changes;
- May not require physicians to participate in all products; and
- Must disclose their methodology for determining “usual, customary, and reasonable” amounts.

Physicians who believe that BCBS violated its agreements should file a compliance dispute form, says the Physicians Advocacy Institute (PAI), which enforces the settlement on behalf of physicians. The forms are available in the RICO Case Materials section of the TMA website and the Compliance Center of the HMO Settlements website. There is no cost to file a dispute. TMA helped create PAI and is an active member, assisting in enforcement of the settlements.

The TMA Hassle Factor Log program, as well as the TMA Office of the General Counsel, also can help.

TMA will continue to monitor the company’s performance in honoring the settlement terms.

*Source:* TMA Action, June 15, 2010

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Sign AND Share the Medicare Meltdown petition!

Executive Board Actions

At its June 7 meeting, the Executive Board took the following action:

⇒ It was agreed to send members another notice regarding arrival of hurricane season and NCMS’ need for current contact information on file.

⇒ It was agreed that Dr. Buck would identify additional physicians to attend next meeting of the NCMS HIT/HIE Committee and contact TMA for guidance on draft principles and recommendations.

⇒ It was agreed to include SPAR members as interested participants in HIE/HIT grassroots effort.

⇒ It was agreed to invite Dr. Susan Rudd Bailey, TMA President, to speak at the NCMS Installation Dinner on Friday, December 10, at the Corpus Christi Town Club.

⇒ It was agreed to continue current employee group insurance plan and look at establishing a savings account in conjunction with insurance plan for the future.

⇒ It was agreed to add BACALA link to NCMS website and list NCMS as a supporting organization.

⇒ It was agreed to approve the president’s appointments to the 2010 Nominating Committee: Drs. Gary Bobele, Gregg Silverman, and Wes Stafford.

⇒ It was agreed to delay healthcare reform presentation to Westside Rotary until Aug. or Sept.

⇒ It was agreed to suggest names of endocrinologists to YMCA to assist with Diabetic Boot Camp.

⇒ It was agreed to have a cash bar at the June 9 Membership Meeting Social.
Dr. Mathew Alexander, Dr. Stefan Konasiewicz & Dr. Melissa Macias

Request the pleasure of your company for our 3rd annual 4th of July celebration w/ food, drinks, & live music @

South Texas Brain & Spine Center
1227 3rd Street
Corpus Christi, TX 78404

Friday, July 2, 2010
6:30pm

We hope that you’ll come
And plan to stay
And celebrate with us
On this patriotic day!

**WE WILL ALSO BE CELEBRATING DR ALEXANDER & DR MACIAS BIRTHDAY**
TDI required quality in ratings

Health insurers cannot rank physicians solely on cost, but must take into account quality of care when they rate their performance under rules the Texas Department of Insurance (TDI) adopted in May. TDI agreed with virtually all of the recommendations the Texas Medical Association made when it adopted the rules.

TDI finalized the rules to enforce legislation the Texas Legislature passed in 2009. House Bill 1888 by Rep. John Davis (R-Houston) and Sen. Robert Duncan (R-Lubbock) requires health plans to conform to nationally recognized standards and guidelines when ranking or tiering physicians. Additionally, it gives physicians due process protections, including:

- Notice of the standards and measures the health plan uses prior to any evaluation period;
- An opportunity to dispute the ranking prior to publication;
- A minimum of 45 days written notice of the proposed rating, or tiering, including all methodologies and information the company used;
- A fair reconsideration process (if timely requested), and
- A written communication of the outcome of the proceeding prior to publishing the ranking or tiering.

Source: TMA Action, June 1, 2010

Fee cut impact lessened

State officials released their spending cuts May 18. A Texas Medical Association (TMA) staff analysis of the reductions indicates that while all physicians will see a 1-percent fee cut for treating Medicaid and Children’s Health Insurance Program patients, a proposal for an additional 1-percent cut for physicians who care for adult Medicaid patients and those in nursing homes was scrapped. The fee cuts begin Sept. 1.

Officials also rejected a proposal to cut 200 inpatient public mental health beds and to partially restore uncompensated trauma care funds.

Gov. Rick Perry, Lt. Gov. David Dewhurst, and House Speaker Joe Straus ordered the Legislative Budget Board staff to notify state agencies to immediately implement the budget savings proposals they requested earlier this year. They say the cuts will save about $1.2 billion in the current 2010-11 biennial budget. In January, the state leaders told state agencies to submit a plan to cut their budgets by 5 percent because of a budget deficit that is expected to worsen next year.

Source: TMA Action, June 1, 2010

The 2010 NCMS Directory is here! Active members receive a complimentary copy; however, additional copies may be ordered by submitting the form below. Mail checks to 1000 Morgan Ave., Corpus Christi, TX 78404.

NCMS Pictorial Directory $20.00 each Plus shipping and handling charges ($5.00). To avoid S & H charges pick up your order at the NCMS office – 1000 Morgan Ave.

Send ____ copies to address below

Name ______________________ Practice/Company ______________________

Address_________________________________________________________

City _______ State _______ Zip _______ Phone ______________________

FOR CREDIT CARD ORDERS: (circle one) Visa __ MC __

Card Number: _______________________________ Expiration date: ______________________

Name on card: _______________________________ Phone: ______________________

Amount to be charged on card: __________________ Signature: ______________________

Mail to: NCMS * 1000 Morgan Ave. * Corpus Christi, TX 78404 For questions, call the Society at 884-5442.
Prep for another HIPAA change

If you electronically submit administrative transactions, such as checking a patient’s eligibility, filing a claim, or receiving a remittance advice, either directly to a health insurance payer or through a clearinghouse, the version of the transactions currently in use will be updated. The US Department of Health and Human Services (HHS) announced that updated versions of the HIPAA transactions will be required for use by physicians and others on January 1, 2012. The Center for Medicare and Medicaid Services (CMS) is the agency within HHS charged with overseeing compliance with the standards.

Updating to the 5010 transaction

The present version of HIPAA transaction is 4010A1 completed in 2002. Since then, many technical issues identified in the transactions were corrected and changes were made to accommodate new business needs. There is continuous work on updating the standards and implementation guides for the transactions to better meet the needs of the health care industry. Work was completed between 2006 and 2007 on a newer version of each transaction, Version 005010, commonly called “5010.”

Because the 4010A1 version of the transactions is named in a federal rule, the regulatory process must be followed to upgrade to the 5010 version. In 2007, a request was made to the Secretary of HHS to modify HIPAA to replace version 4010A1 with version 5010. The final rule was published on January 16, 2009, and makes the 5010 transactions mandatory on January 1, 2012. The Final Rule allows for the use of the 5010 transactions prior to the compliance date to facilitate the migration to the updated transactions and prevent the need to convert overnight.

In addition, a Final Rule adopting ICD-10 as the new code set to replace ICD-9, something that cannot occur prior to moving to the use of the 5010 transactions – has been issued. The use of the ICD-10 code set will be mandatory as of October 1, 2013. Because of the need to convert to ICD-10 as soon after complying with 5010, it is imperative that practices begin their transition work to 5010 as early as possible. The Final Rule does not allow for the use of ICD-10 codes prior to the compliance date.

What physicians can do now to prepare for 5010

The biggest concern for practices will be complete implementation and full functionality of the 5010 transactions at or before the compliance deadline to avoid transaction rejections and subsequent payment delays. Practices can begin now to prepare for this upcoming effort by developing their own implementation plan. The following are various tasks to include in an implementation plan.

1. Talk to your current practice management system vendor.
2. Talk to your clearinghouses or billing service, if you use either one, and health insurance payers.
3. Identify changes to data reporting requirements.
4. Identify potential changes to existing practice workflow and business processes.
5. Identify staff training needs.
6. Test with your trading partners, e.g., payers and clearinghouses.
7. Budget for implementation costs, including expenses for system changes, resource materials, consultants, and training.

The following are additional resources for you to use when implementing the 5010 transactions: http://www.cms.gov/TransactionCodeSetsStandards/02_TransactionsandCodeSetsRegulations.asp.

Source: CMS
Law requires electronic death registration

Texas law requires all cause-of-death information and medical certifications to the Texas Department of State Health Services (DSHS) to be submitted electronically through the states’ online death registration system, the Texas Electronic Registrar (TER) at [www.dshs.state.tx.us/vs/edeath/default.shtm](http://www.dshs.state.tx.us/vs/edeath/default.shtm).

Physicians must register with DSHS to participate in the online death registration. Penalties for noncompliance start at $500. If you are cited, you should consider contacting your own retained counsel for legal advice and representation for your situation, because a response to the TMB will be time sensitive. For additional questions, e-mail help-TER@dshs.state.tx.us or go to TER Web site at [www.dshs.state.tx.us/vs/edeath/terhelp.shtm](http://www.dshs.state.tx.us/vs/edeath/terhelp.shtm).

Source: TMA Action, May 17, 2010

Disaster Preparedness – Prepare your practice & patients for disaster

Downloadable brochure

NCMS has provided a downloadable brochure, with detailed information on how to prepare your practice and patients for a disaster. It includes links to other sites. Go to [www.nuecesmedsociety.org](http://www.nuecesmedsociety.org).

We need your current contact information:

Is your information with NCMS current? If not, please give us your contact information so NCMS can contact you about emergency information. Call Sandra at 361-884-5442.

Newcomers’ Party

Attend the Nueces County Medical Society (NCMS) Newcomers' Party on Thursday, Aug. 26, at 7 p.m. at the Corpus Christi Yacht Club, Yacht Basin L-Head. No charge for NCMS members or newcomers. Spouses and guests are $25 each.

Reservations are required. Your check payable and mailed by August 13th to NCMS, 1000 Morgan Ave., Corpus Christi, TX 78404, confirms your reservations.

Billing Headaches???

We can help lower your expenses and increase your income.

Custom Medical Billing Plus, Inc. is a complete medical billing service with state-of-the-art computer equipment and medical billing software. We don’t just file claims—we handle the entire billing process, and in doing so, remove that expense and headache from your office.

Owners Helen Carmichael and Nelda Peña each have over 20 years experience in billing for physicians.

You can benefit from our experience.

Call today!

A PLUS FOR YOUR PRACTICE

3765 S. Alameda, Ste. 317
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361.855.2455
John Hammerick, Jr., M.D. and Todd Weiss, M.D.
would like to announce the opening
of
South Texas ENT & Allergy

5920 Saratoga Blvd., Suite 425
Corpus Christi, TX 78414
Tel 361-994-4880  Fax 361-994-4890

John Hammerick, Jr., M.D.
Board Certified by the
American Board of Otolaryngology

Todd Weiss, M.D.
Board Certified by the
American Board of Otolaryngology

Accepting new patients